

HEALTH STRATEGY BUREAU

DAVIS COUNTY
HEALTH DEPARTMENT

2022
IMPACT REPORT

Mission

Pursue health equity with a commitment to address the causes and conditions leading to health inequities and, in turn, reduce health disparities.

Vision

All Davis County residents can achieve their full potential for health and well-being.

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Introduction



Visit us at our website: daviscountyutah.gov/health/strategy.

The Health Strategy Bureau was formed in the middle of 2021 and 2022 was the Bureau's first full year of existence.

The Health Strategy Bureau is a multidisciplinary team working on emerging issues, broad cross-cutting topics, and community priorities. The Bureau works to address community needs and gaps not addressed by other more traditional areas of the Health Department. We use a teamwork approach as our standard practice for complex public health issues. Each project and initiative benefits from the expertise of Community Health Educators, Community Health Workers, Community Outreach Planners, and Epidemiologists in consultation with community partners and stakeholders.

The Health Strategy Bureau is responsible for coordinating efforts to advance health equity, which is accomplished in four ways:

1. **Build** employee, department, and community infrastructure and capacity to advance health equity
2. **Assess** and share data
 - a. Lead the Davis4Health Community Health Assessment (CHA)
 - b. Incorporate community voice and lived experience of residents
3. **Engage** community partners and convene stakeholders
 - a. Lead Davis4Health, the county's health and equity improvement collaborative, which guides community health improvement processes including the CHA and Community Health Improvement Plan (CHIP)
4. **Advocate** for those who are historically underserved and/or underrepresented

This year we worked to develop common language and a shared understanding of what it means to advance health equity. We identified values, rituals, and symbols that guide our approach. The concepts and language were reviewed by the Davis County Health Department Equity Committee as well as Davis4Health partners.

It's our pleasure to support the Department and the community through these efforts.


Isa Perry, MPH, CHES®
HSB Manager

Definitions

Health Inequity:

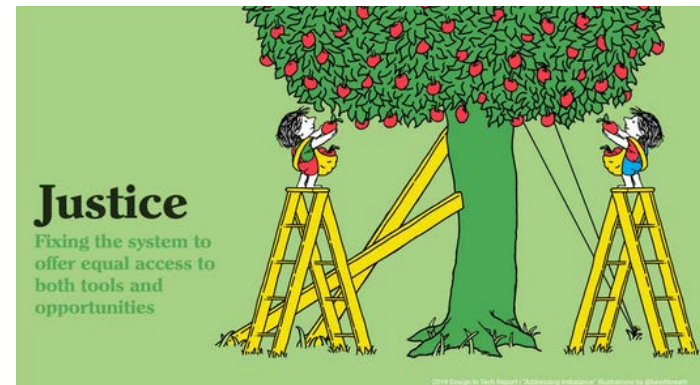
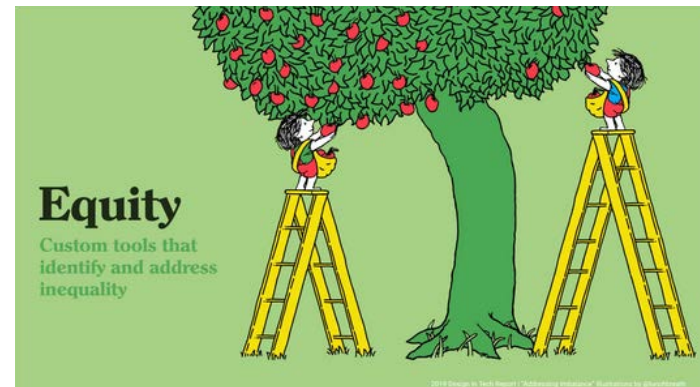
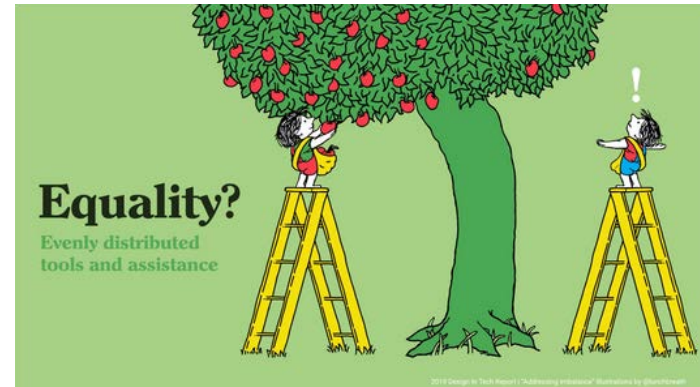
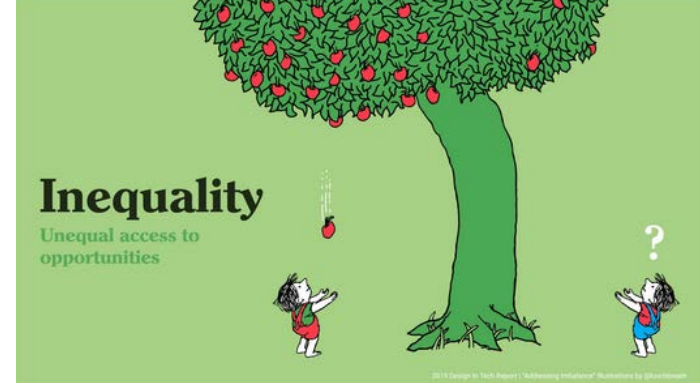
The uneven distribution of resources; barriers that limit access to community resources and opportunities. Inequities lead to, and are reflected in, disparities.

Health Disparities:

Avoidable, unfair, and unjust differences in health outcomes.

Health Equity:

When every individual has a fair and just opportunity to live their healthiest life. It doesn't matter who they are, where they live, or how much money they have.



Values and Guiding Statements

These values guide our health equity work. They do not have simple definitions. They are broad, complex concepts which can be understood and practiced in different ways. They are high ideals that require continual development as we strive to live them.

Compassion

We believe in our shared humanity and treat ourselves and others with kindness.

Hope

We approach our work with patience, perseverance, and optimism for the future.

Humility

We commit to continuous learning with and from each other.

Integrity

We hold ourselves accountable to the community we serve and represent.

Respect

We recognize the human rights, perspectives, and experiences of others.

Members of the Health Strategy Bureau



Dave Spence
MBA, LEHS
Deputy Director, Health

Administrative Support



Isa Perry
MPH, CHES®
Bureau Manager

Community Engagement
Prevention Science
Strategic Planning



Logan Hyder
MPH
Lead Epidemiologist

Community Health
Assessment (CHA)
SAS Certified
GIS Mapping



Cody Mayer
MPH
Epidemiologist

Equity Data Specialist
GIS Mapping
Qualitative Data Analysis



Marcie Clark
BS, CHES®
Community Outreach
Planner

ACEs & Trauma
Housing
Human Services



Teresa Smith
BS, CHES®
Community Outreach
Planner

Davis Links
Mental Health
Suicide Prevention



Travis Olsen
BS, MCHES®
Community Outreach
Planner

Accessibility
Food Environment
Spanish speaker



Kaylee Crossley
MS, CHES®
Lead Community
Outreach Planner;
Community Health
Worker Supervisor

Opioids
Oral Health



Celina Diaz
BS, CHES®
Community
Health Worker

Latino Population
Spanish speaker



Danty Marshall
CHW Rookie of the Year
Community
Health Worker

Pacific Islander
Population
Marshallese speaker



Daline Figaro
BS
Community
Health Worker

Older Adults
Haitian Creole speaker



Hillary Christensen
MFHD
Community
Health Educator

Evaluation
Human Development
LGBTQ+ Population



Lori Greene
BS, CHES®
Community
Health Educator

Bureau Collaboration &
Logistics



Kaycee Batt
BS, CHES®
Community
Health Educator

Document Design &
Formatting
Bureau Communications



Lori Greene, Kaycee Batt, and Hillary Christensen

Community Health Educators

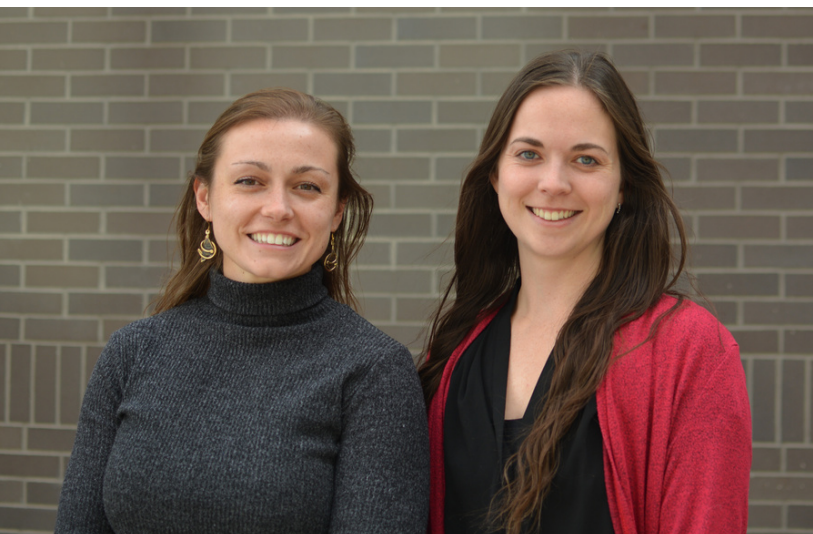
Community Health Educators work with individuals, families, communities, and public/private organizations to create, implement, and analyze strategies that promote health and well-being.

The National Commission for Health Education Credentialing lists Eight Areas of Responsibility that define the role of a health education specialist:

- | | |
|-------------------------------------|-------------------------------|
| 1. Assessment of Needs and Capacity | 5. Advocacy |
| 2. Planning | 6. Communication |
| 3. Implementation | 7. Leadership and Management |
| 4. Evaluation and Research | 8. Ethics and Professionalism |

Community Health Educators are versatile and possess a range of skills. They assist in many, if not all, Health Strategy Bureau initiatives.

Highlights of this year include creating and sharing the County Health Rankings infographic; developing and promoting the Davis4Health Community Resilience Survey; and vetting and compiling Davis County behavioral health resource directories.



Logan Hyder and Cody Mayer

Epidemiologists

Epidemiologists are technical experts who collect and analyze data so community partners and leaders can make informed decisions. They help turn numbers into action and make data approachable.

Public health practice emphasizes assessment to identify the challenges and strengths that impact a population's health. Epidemiologists lead the design, collection, and analysis of data for assessment processes. They also serve as consultants to programs on data collection, protection, analysis, interpretation, and visualization.

Highlights of this year include coordinating the Davis4Health CHA and leading a Community Equity Assessment that included focus groups with residents who are typically underserved.

The team also provided the following services to Davis County Health Department (DCHD) staff and external partners:

- Quantitative and qualitative data support with statistical and mapping software
- Data analyses of health disparities and inequities
- Division and bureau data collection efforts on inclusive terminology, reducing bias, survey design, and reporting methods
- Department staff training on data tools and best practices to support data-driven programs and expand data literacy
- Identified program evaluation metrics
- Searched and summarized health indicator trends for division programs
- Data sharing facilitation among divisions and agencies

Community Outreach Planners

Community Outreach Planners are Community Health Strategists who lead collaborations across multiple sectors. They help facilitate alignment to address the county's top health improvement priorities.

Modern community health priorities are complex, rooted in the conditions in which people are born, live, work and age, and are addressed in some way by many community and public health system partners. Current public health practice emphasizes engaging these partners to generate collective impact and improve health through policy, environmental, and system-level actions.

Community Outreach Planners work with community leaders and stakeholders from many organizations including human services, healthcare, education, emergency responders, cities, nonprofits, faith, etc. Structured coalitions, workgroups, committees, councils, and networks identify and address the health needs of the community, create strategic plans, and monitor progress. They explore ways to focus community resources on improving specific health outcomes, especially among those with the greatest need.

Highlights of this year include leading Davis4Health, coordinating the annual Community Resilience Symposium, facilitating nine focus groups, and gathering data to document and recognize community successes toward improving health.

Community Health Workers

Community Health Workers (CHWs) are frontline public health workers who serve community members in culturally appropriate ways. They help with language and translation needs, provide health education, attend outreach events, and help connect people with resources.

Three team members became certified CHWs through the Utah Community Health Worker Core Skills training from the Department of Health and Human Services. Danty Marshall received the Rookie of the Year award at the Utah Community Health Workers Association (UCHWA) launch party. She was recognized for her efforts in engaging the Pacific Islander community and connecting them with services. She initiated the development of the Davis County Marshallese Moms and Babies Workgroup.

Community Health Workers represent and reach populations in Davis County that have never been effectively served before. Hiring staff with the needed skill set for this role is a significant achievement toward advancing health equity and reaching underserved populations.

In order to provide more direct service to the community, the CHW main phone line, 801-525-4950, and webpage, daviscountyutah.gov/health/community-health-workers, were launched.



Kaylee Crossley, Teresa Smith, Travis Olsen, Isa Perry, and Marcie Clark



Celina Diaz, Daline Figaro, Kaylee Crossley, and Danty Marshall

Build Infrastructure to Advance Health Equity

Build Infrastructure to Advance Health Equity Summary by the Numbers

16	Structured equity discussions with partners
14	Equity consultations with other agencies
13	Equity training courses completed by all HSB staff
7	Internal committees supported
6	Internal committees led
6	Equity presentations for community leaders
3	Accessibility assessments
2	Staff accessibility trainings
1	Internal equity assessment

Equity Discussions with Partners

Partner equity interviews and discussions were held to discover what equity initiatives are underway, look for alignment opportunities within county equity initiatives, create a safe space for conversations about equity, and hear diversity of opinions. Interview themes included:

- Some agencies' sole purpose is to serve populations that are underserved and address community conditions that impact health
- Many key partnerships are already in place
- Existing frameworks and documents guiding the work were identified
- Federal/state emphasis has led to additional resources
- There are new equity, inclusion, diversity, and accessibility (EDIA) positions in some agencies
- Many are working to improve infrastructure, processes, and services for equity
- Davis4Health CHA and CHIP contain many equity components; received recommendations to work towards a more formalized framework and support for developing a county-wide equity improvement plan

Evaluate Equity Infrastructure

In early 2022, Health Strategy Bureau staff joined DCHD leadership to complete the Building Organizational Capacity Assessment (BOCA), a baseline survey of local health departments designed to assess health equity capacity.

Areas of Focus

- Commitment to Health Equity (including funding for equity work)
- Data Collection
- Human Resources
- Equity, Diversity, Inclusion, and Access (EDIA) Quality Improvement
- Capacity to Deliver Services
- Use of Community Health Workers
- Accessibility of Information and Services
- Collaboration Across Agencies
- Training and Workforce Development

Areas of Opportunity

- Reflect health equity in guiding statements
- Standardize collection, analysis, and reporting of data about race/ethnicity, income, language, gender identity, disability status, and sexual orientation
- Sustain a workforce to advance health equity

Three accessibility assessments were conducted:

1. The state Disability and Health Program included survey questions in the BOCA about accessibility of health education programs and educational materials.
2. The Utah State University Institute for Disability Research, Policy, and Practice conducted an onsite visit to assess physical facilities.
3. An external evaluator used the WebAIM tool to assess accessibility of the DCHD website.

Build Infrastructure to Advance Health Equity

Training

This year, staff participated in a wide range of training opportunities and skill building workshops from national, state, and local sources including: all day retreats, symposiums, in-person workshops, multi-week online professional development series, multi-month national coaching sessions, podcasts, a book club, and more.

All staff continued to develop professionally and personally in the work to advance health equity by taking part in:

- Take Action Cycle Training - Strategic Prevention Framework for Davis4Health
- Resilience Symposium and Film Documentary
- Unconscious Bias Workshop: From Awareness to Action
- Utah Healthy Places Index Workshop
- Self-care (Developing a Self-care Plan, Energy Medicine, Mindfulness)
- Story of Self (Understanding how staff are connected to one another and their work)
- Health Equity Professional Development Training Series from Utah Department of Health and Human Services (DHHS):
 - Introduction to Equity, Diversity, Inclusion, and Accessibility
 - Introduction to Health Equity
 - Health Equity Strategies
 - Intersectionality
 - Stereotypes & Bias
 - Sexual Orientation and Gender Identity
 - LGBTQ+ 2.0



Additional equity, diversity, inclusion, and accessibility topics for some staff included: Utah Root Causes of Health Initiative (RoCHI), "The Sum of Us: What Racism Costs Everyone and How We Can Prosper Together" book club discussion; How to Support the Mental Health of the LGBTQIA+ Community; County Health Rankings webinars and In Solidarity podcast about gender pay and racial wealth gaps; Social Connectedness; equity efforts during the COVID-19 pandemic; Disability 101 and Inclusion Training; Document Accessibility; Equitable Communications and Engagement; etc.

Staff from the Health Strategy Bureau were on the planning team for the following state and regional equity trainings:

- Utah RoCS (Root Cause Specialists) Equity Action Lab Design Team
- HEAL (Healthy Environments, Active Living) Equity Training Planning Committee
- Health Equity Retreat Planning Committee (Health Disparities Grant)

Staff participated in Train the Trainer opportunities and are approved instructors for these community education programs:

- Everyday Strong
- Families Talking Together
- Utah Healthy Places Index

Staff are also seen as experts in providing internal training to build capacity. They can provide training on web design in Sitefinity and the use of Utah's Public Health Indicator-Based Information System (IBIS).

Build Infrastructure to Advance Health Equity

Communication Improvement

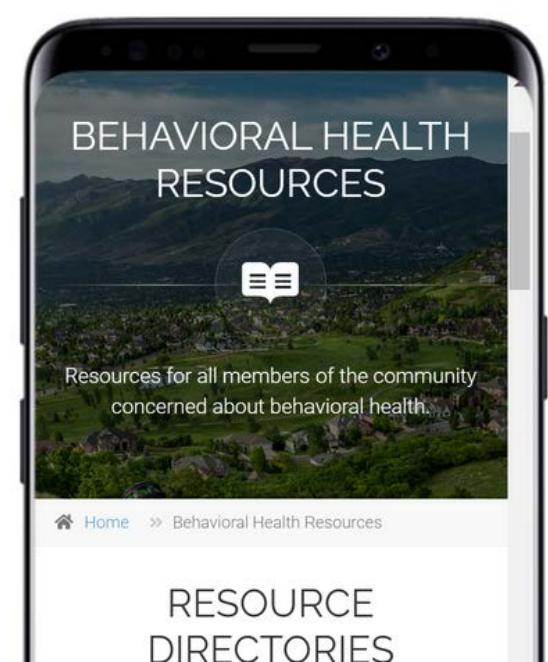
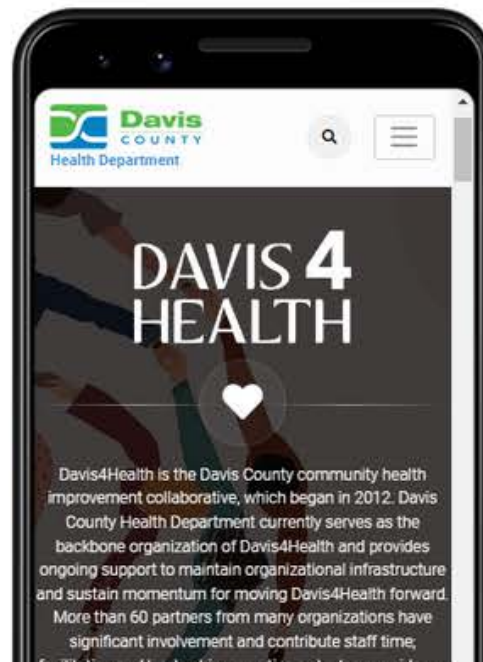
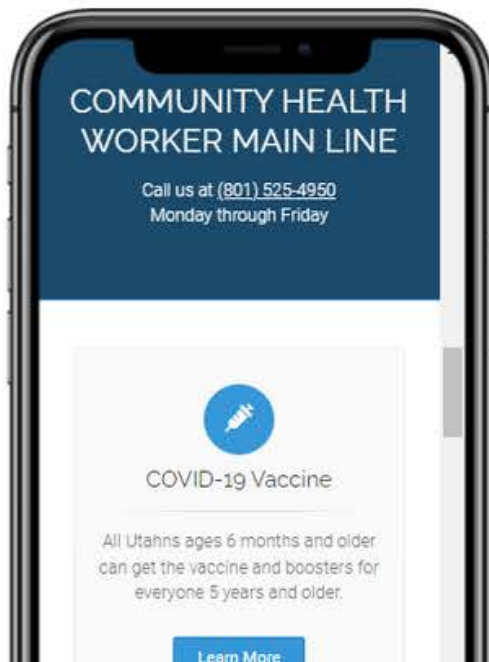
Staff participated on the Communications Task Force and made several contributions for improvement of internal and external communication efforts:

- Led an overhaul of internal TV monitor messages, created a new navigation slide, and updated several educational messages (see next page)
- Designed signage consistent with DCHD branding for every office door in the Department to replace outdated signage
- Designed a logo for Rides4Health, the medical appointment transportation service offered by Senior Services
- Wrote several articles that were included in employee newsletters, highlighting equity training opportunities, assessment progress, and staff achievements/changes
- Worked with Information Systems to create web pages for Health Strategy Bureau, Community Health Workers, Davis4Health, and Behavioral Health Directories (see images below)
- Assisted with updates of several other web pages, including COVID-19, Immunizations, WIC, and Opioid Safety pages

Communication Improvement Summary by the Numbers

180	DCHD door signs updated to branding
30+	New or updated TV monitor messages
16	Contributions to the employee newsletter
10	Webpages updated
4	Webpages created
2	Assists with EDIA related grant applications
2	Consults on EDIA complaints from residents

Communication support included partnering with other divisions to write two grant applications, the Community Development Block Grant (CDBG) with Senior Services and the Comprehensive Suicide Prevention Grant with Community Health. Additionally, DCHD leaders received a couple of complaints from residents about Department inclusion efforts going too far. HSB staff were consulted in the development of responses.



Build Infrastructure to Advance Health Equity

1st floor

Vital Records

Birth & Death Certificates
Marriage & Divorce Certificates

Immunizations Desk

Adult & Children's Immunizations
COVID-19 Vaccines
STI Testing
TB Placement & Testing
Travel Vaccinations

WIC Desk

Breastfeeding Support
Women, Infants, & Children (WIC)

2nd floor

Communicable Disease Nurses
Environmental Health

3rd floor

Administration
Community Health Services
Community Health Workers (CHW)
Maternal Child Health / Home Visiting
Senior Services / Medicare / Meals on Wheels

**For 2nd and 3rd floor services,
please visit the Reception Desk
on each floor for help.**



Community Health Workers

Our Community Health Workers help connect individuals to Davis County health information and resources.



Languages:

• English • Kajin Majol
• Español • Kreyòl Ayisyen

Community Health Worker Line:
801-525-4950

Healthy Choices. Healthy People. Healthy Communities.

Vaccinations protect you and your family.

Call 801-525-5020 to
schedule an appointment.



¡Comida saludable y más para tu familia!

Puedes calificar para WIC si:

- estas embarazada
- tienes un hijo o hijos menores de 5 años
- tienes un ingreso familiar menos del nivel de ingresos de WIC

WIC proporciona alimentos saludables, pañales, apoyo a la lactancia materna, educación nutricional y más.



¡Ahora es el momento de aplicar!

Llama al 801-525-5010 o escanea el código para ver si calificas.

Esta institución es un proveedor de igualdad de oportunidades.

Build Infrastructure to Advance Health Equity

Internal Committees

The Health Strategy Bureau supports the programs and services of the Davis County Health Department, represents community voice, and uses an equity lens while participating on internal committees. The HSB leads six internal committees and supports other DCHD committees with at least one staff member participating on each committee.



Committees Led by HSB

- CHA Committee
- CHIP Team
- Davis4Health Equity Symposium Planning Committee
- Equity Committee (pictured to the left), highlights in 2022 included:
 - Shared successes and efforts to demonstrate how DCHD is addressing health equity in the community
 - Cultural spotlights: Dine Culture (Navajo), Samoan Culture and Dance, Haitian Heritage Month, Experiences Supporting Immigrants and Refugees, Pioneer Day, LGBTQ+, Utah Pacific Islander Community, Dia de Los Muertos (All Saints Day)
 - Guest Presenters: Michael Harris (EDIA Officer), Tima Clawson (Utah Pacific Islander Health Coalition, UPIHC)
 - Plan for 2023: Transition to focus on internal workplace equity
- Lesbian, Gay, Bisexual, Transgender, Queer, Plus (LGBTQ+) Workgroup
- Student Health and Risk Prevention (SHARP) Survey Workgroup

Committees Supported by HSB

- Communications Task Force
- Management Team
- Performance Management & Quality Improvement (PM/QI) Team
- Preparedness Advisory Committee
- Re-Accreditation Committee
- Wellness Committee
- Strategic Plan Committee - Provided equity components for the environmental scan and the mission, vision, and value updates

Division Liaisons

The Community Health Workers serve as liaisons for each DCHD division. As such, they provide support to the different teams in many ways as needed, including community connections, document translation, and program enrollment.

Celina Diaz	Daline Figaro	Danty Marshall
Community Health Environmental Health	Senior Services	Administration Communicable Disease & Epidemiology Family Health Services

Build Infrastructure to Advance Health Equity

Equity Consultations

Other Health Departments

- Shared resources for hiring epidemiologists directing the CHA with San Juan Public Health and Bear River Health Department, including interview questions, assignments, and processes
- Met with Weber-Morgan Health Department CHWs to share successes, challenges, and opportunities
- Shared focus group and other assessment documents with Wasatch County Health Department
- Provided technical assistance to Salt Lake County Health Department for community engagement and community health assessment processes
- Provided Utah County Health Department example equity discussion guides for assessment and planning efforts
- Provided DHHS Violence and Injury Prevention Program with focus group materials and lessons learned
- Participated in the DHHS Utah Healthy Places Index Webinar Launch and provided brief partner presentation

Community Partners

- Provided equity presentations to community leaders (Board of Health, City Mayors, Davis Technical College Foundation Board)
- Provided content for Day in the Life video used in the Westminster College Intro to Public Health class
- Participated in interviews with Utah State University and Brigham Young University Master of Public Health students
- Participated in an interview with the County Health Rankings & Roadmaps Team as they worked to redesign their webpages and add new features and tools
- Participated in the I-15 Environmental Impact Study and Equity Workgroup for redesign of the freeway in South Davis County; made recommendations about consulting populations that are underserved and underrepresented that should be invited to provide feedback
- Provided SHARP data by race/ethnicity to inform priority selection for Layton Communities That Care Coalition
- Consulted with National Family Support Network partner to explore use of a Family Resource Center Landscape Survey and a broader assessment to understand how community resource centers are functioning in Davis County



Assess and Share Data

Assess and Share Data Summary by the Numbers

13	Division and partner consults
11	Assessments and projects supported
10	Presentations to staff and coalitions
9	Trainings delivered to multiple divisions
9	Focus groups
7	New connections to data sources
7	Report errors caught and submitted to DHHS
5	Population profiles created
2	Interns supervised

Data-related efforts in 2022 supported DCHD leaders and community partners in making informed decisions. Efforts aligned with DCHD Strategic Plan principles of “Data Driven” and “Transparent” public health practice. Activities included synthesizing existing data sources, collecting quantitative and qualitative data from the community, fostering data sharing relationships, advocating for data security and accuracy, and promoting a culture of continual assessment.

Data Collection and Reporting

As part of the Health Strategy Bureau's assessment work in 2022, staff gathered and summarized quantitative and qualitative data from existing sources, surveyed the community, and organized focus groups with members of underserved/underrepresented communities.

Community Reports

A culture of continual assessment ensures public health efforts are data-driven and that data are accessible to the community.

The Health Strategy Bureau produced multiple assessments that dive deeper into specific health topics and community conditions. These specialized assessments feed into the larger Community Health Assessment (CHA). Each of these reports can be found on the DCHD website at daviscountyutah.gov/health/reports-and-assessments.

County Health Rankings Infographic & Summary

An annual snapshot of county health outcomes and factors ranked against all other counties in Utah, highlighting strengths and areas for improvement.

COVID-19 Vaccine Equity Progress Report

An update for partners, stakeholders, and community members on the Davis County Health Department's effort to make the COVID-19 vaccine accessible to all members of the community.

Healthy People 2030 Summary

A one page infographic and summary that compares Healthy People 2030 targets for leading health indicators to Davis County data.

Pacific Islander Community Health Indicator Report

A compilation of data including access to healthcare, mental health, physical health and chronic disease, cancer, and reproductive health. Potential health disparities and inequities were identified when comparing Pacific Islander health indicators to all residents in the county and state. This was requested by UPIHC.

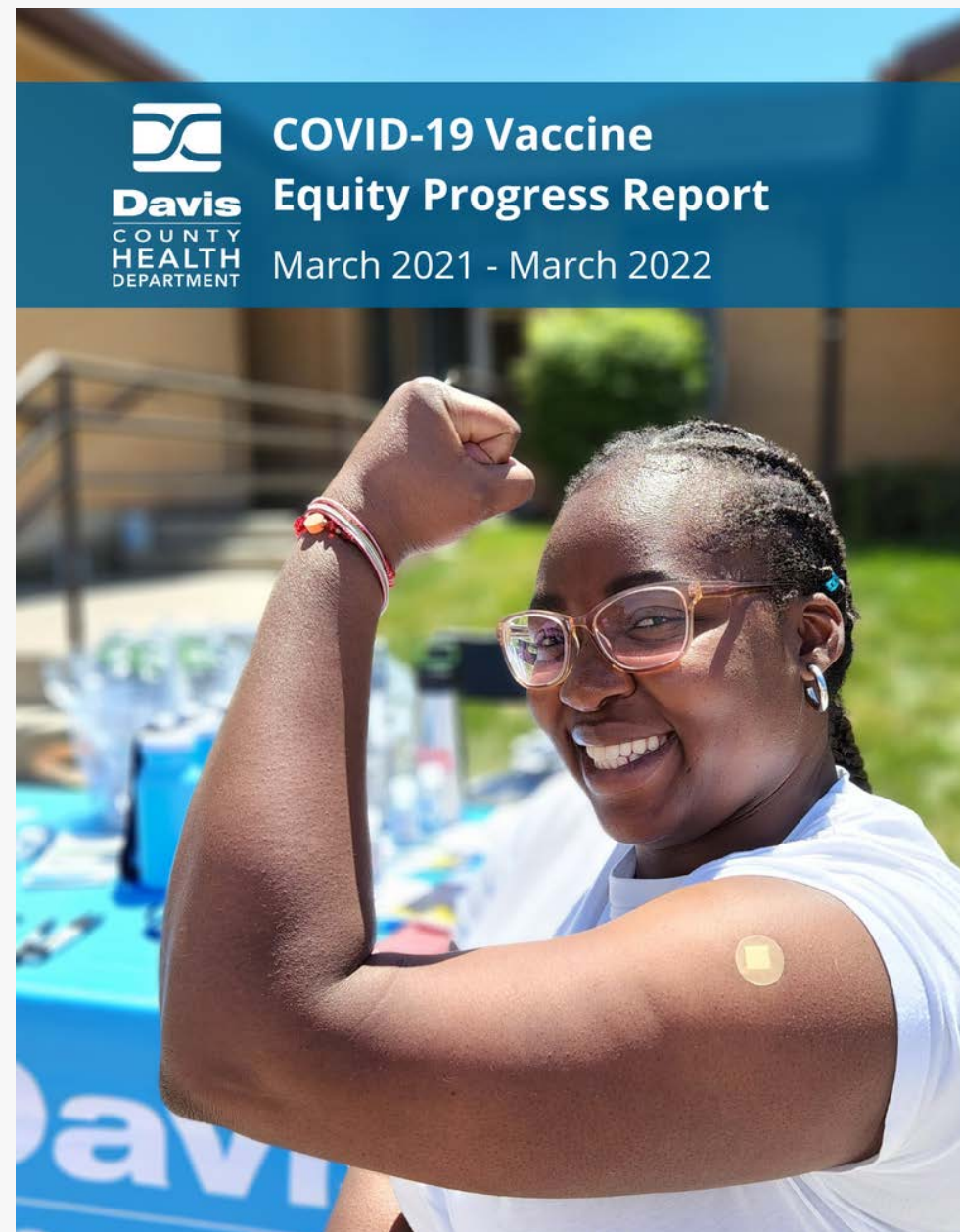
Older Adult Health Profile

A one page summary of health outcomes and behaviors among those age 60 years and older living in Davis County, highlighting strengths and challenges of the population.

Utah's Student Health and Risk Prevention (SHARP) Survey, Risk & Protective Factor Heatmaps

A summary of the risk and protective factors identified in the 2021 adolescent SHARP Survey. Data is compared across race and ethnicity groups.

Assess and Share Data



Assess and Share Data

Collecting Community Voice Summary by the Numbers

1,175	Community resilience survey respondents
193	Nutrition survey respondents
76	Focus group participants

I have no life... I live to work and work to eat.

Davis County was a great place to grow up and then to raise my family here also. My children have homes in Davis County also and are raising my grandchildren here.

The things that stress me and challenge my mental health are inflation, rising food and gas prices, all while my paycheck is not increasing enough to keep me at a level spot.

I am proud and grateful to be a part of the Davis County community!

The cost of gas and groceries have made it **EXTREMELY** difficult. I have missed some activities because of cost to get there. Limit trips to save money. Public transportation is limited where I live and where I need to go. My home is older and needs repairs which I pay to have done. Keeping home well maintained is important but only one income puts me on limits.

Data Collection and Reporting

Community Voice

Collecting and sharing lived experiences and community themes from those who live in Davis County adds context to data. It adds a face to the statistics and provides a local perspective on community strengths and needs.

Community Resilience Assessment

This assessment explores the **individual characteristics, relationships and social skills, and connection to the community that make up “resilience”**, or the ability to bounce back from life’s challenges. Over 50 partners shared the survey and 1,175 Davis County residents responded, including residents from every city and many ages, nationalities, religions, and sexual orientations. A complete report of the results from this assessment will be released in 2023.



Assess and Share Data

Community Equity Assessment

This assessment aims to identify structural factors that impact health equity in Davis County. Staff conducted 9 focus groups with 76 Davis County community members to **explore root causes of inequities and adversities in those who feel underserved and underrepresented where they live**. With representation from people of varying identities, cultures, abilities, ages, and histories, this diverse collection of stories, thoughts, and experiences should encourage community engagement and guide improvement strategies. The final results of this assessment will be shared in a standalone report in 2023 and will be incorporated into the CHA and LGBTQ+, Seniors, Food Environment, and Housing Assessments.

I think some of the neighbors do a really good job of making you feel welcome.

We are struggling with housing...living in a motel right now.

Sometimes it can feel like you're isolated, like you don't belong.

I live alone now, and I feel really safe.

Davis County has been very kind to me. So I'm very thankful.

We want to hear your story!
Join the conversation and help guide our efforts to help you live your healthiest life

You will receive a meal and \$25 gift card for your time and participation!

Join us for an important 90 minute conversation. We are looking for individuals who:

- Reside in Davis County & are age 60+
- Have the desire to influence their community for good, but feel underserved or underrepresented where they live

North Davis Senior Center in Clearfield on **Tuesday, May 24** from 10:30 a.m. - 12 p.m.

Call **385-288-1145** to register or for more information



WE WANT TO HEAR YOUR STORY
you can help guide our efforts to help you live your healthiest life

celebrating my culture with others | sharing my story | providing for myself and my family | finding a place to live | connecting with people who are different than me

All participants will receive a meal and \$25 gift card.

We are looking for individuals who:

- Reside in Davis County & are age 18+
- Identify with the LGBTQ+ community
- Have the desire to influence their community for good, but feel underserved or underrepresented where they live

Join us in Kaysville on **Wednesday, June 1** from 6-7:30 p.m.

Scan this code or call **385-288-1145** to register

Questions? Call or text Hillary at the number above or email hchristensen@daviscountyutah.gov



We want to hear your story!
Help guide our efforts to help you live your healthiest life.



Join us in Layton on **Saturday, July 30** from 12-1:30 p.m.

We are looking for individuals who:

- Reside in Davis County & are Veterans
- Have the desire to influence their community for good, but feel underserved or underrepresented where they live

Scan this code or call **385-288-1145** to register

Questions? Call or text Hillary at the number above or email hchristensen@daviscountyutah.gov

You will receive a meal and \$25 gift card for your time and participation!

Davis Summer Lunch Program Nutrition Survey

This survey was distributed in the summer of 2022 at Davis School District summer lunch sites to learn about households' food and nutrition habits and will be included in the 2023 Davis Food Environment Assessment. With 193 participants from all but one city in Davis County, one of the most important findings was that one in four respondents reported not knowing where to turn for food assistance should they need it. The quotes to the right are responses to the survey question, **"What is healthy eating to you?"**

Food that doesn't taste good.

Expensive! But I think we all need to try harder to be healthy.

Fruits and veggies matter! And whole grains.

We try to eat fresh foods, a good balance. We rarely eat out, limit sugar and fat, and don't eat processed or pre-prepared meals often. We also eat meals as a family.

One home cooked meal a week.

Assess and Share Data

Data Collection and Reporting

New Data Sources

HSB staff facilitated connections with new and existing partners to obtain data that DCHD did not have access to previously.

Utah Well Being Project	Staff met with a USU professor and graduate assistant who assisted with a resilience literature review and shared 2021 survey data for Bountiful and Layton; this data shows strengths and concerns at a city level
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Department of Professional Licensing (DOPL)	Shared county and zip code level data from the Controlled Substance Database (CSD) on opioid prescription details; this data was needed for a CHIP progress measure; an additional CSD request resulted in accessing data for most common prescriptions, an important component of the 2023 CHA
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Intermountain Health	Shared 2019 BRFSS qualitative data on top health concerns at the county level
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DHHS Division of Data, Systems, & Evaluation	Shared county BRFSS data for indicators not publicly available with demographic breakdowns for equity analysis; data related to caregiving and adult sleep
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DHHS Office of Substance Use and Mental Health	Staff talked with the project leads on the <i>Health Disparities in Utah's Public Mental Health and Substance Use Treatment Systems Needs Assessment</i> regarding the results of the assessment and they shared county level data that staff was able to present to the Davis Behavioral Health Network Quarterly Meeting
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DHHS Office of Healthcare Statistics	Staff requested claims and facility data to fill gaps identified by the 2017 healthcare assessment including leading prescriptions, procedures, and high deductible plans
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Assess and Share Data

Data Improvements

Staff contributed to efforts inside and outside DCHD to improve the way data about the county population is collected and reported.

Accuracy

Staff thoroughly reviewed the latest population health and equity reports released in Utah in order to apply the information to their own assessments. This often resulted in the discovery of discrepancies, which were shared with report authors so corrections could be made. This year, staff found and reported inaccuracies in each of the following reports:

- DHHS Office of Substance Use and Mental Health Data Dashboard
- DHHS Opioid Data Dashboard
- Utah Health Improvement Index (HII) 2022 Update, Sept 2022
- Utah Health Status by Race and Ethnicity 2021
- Utah Healthy Places Index (HPI) map
- Utah Language Data Report, Aug 2021
- Multiple IBIS query errors

Quality Improvements

In 2022, staff researched and invested in ways to streamline the data collection process:

- Purchased and utilized new softwares, including auto-transcription services and qualitative analysis software, to improve the quality and process of data collection and analysis for focus groups and other qualitative data
- Following state and national guidelines, started the process for standardizing demographic data collection in surveys, questionnaires, and intake forms by drafting multiple question formats for different settings and testing a checklist collection format with focus group participants

Consults

Data consults varied from advising on survey design to intensive mapping projects as HSB supported DCHD staff and partners in collecting, analyzing, and interpreting data to improve their programs. All consults are listed below.

- | | |
|-----------------------|---|
| Administration | <ul style="list-style-type: none">• Employee survey design for Wellness Committee• Vaccine rates by age group and dose number• Legacy Clinic weekly volume report |
|-----------------------|---|

- | | |
|---------------|---|
| CD/Epi | <ul style="list-style-type: none">• Weekly COVID-19 dashboard updates |
|---------------|---|

- | | |
|-------------------------|---|
| Community Health | <ul style="list-style-type: none">• Mapping project of vulnerable populations and various environmental factors that impact preparedness efforts• Mapping of undiagnosed and diagnosed hypertension patients for Tanner Clinic/HEAL (Healthy Environments Active Living) program• Social Determinants of Health provider survey design guidance |
|-------------------------|---|

- | | |
|-------------------------------|--|
| Family Health Services | <ul style="list-style-type: none">• Vaccine exemptions and out-of-compliance data per school; population counts by age group |
|-------------------------------|--|

- | | |
|------------------------|--|
| Senior Services | <ul style="list-style-type: none">• Calculations and mapping of average distance travelled by clients for each senior center• Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis survey design• Needs assessment data and methods• CDBG grant reporting for mobile clinic vans |
|------------------------|--|

- | | |
|------------------------------|---|
| Davis School District | <ul style="list-style-type: none">• Vaccine rates per school for students and staff |
|------------------------------|---|

Engage Community Partners

Coalitions and Collaboratives HSB Coordinates and Leads

Davis4Health

Davis4Health is Davis County's health improvement collaboration with partners from many organizations and sectors working together to improve population health in the community. The collaboration was formalized in 2012. Davis County Health Department currently serves as the backbone organization of Davis4Health and provides ongoing support to maintain organizational infrastructure and sustain momentum for moving Davis4Health forward. Nearly 100 partners from many organizations have significant involvement and contribute staff time, facilitation and leadership, expertise, volunteers, guidance and decision-making, advocacy, data, community connections, and in-kind donations.

Davis4Health Mission

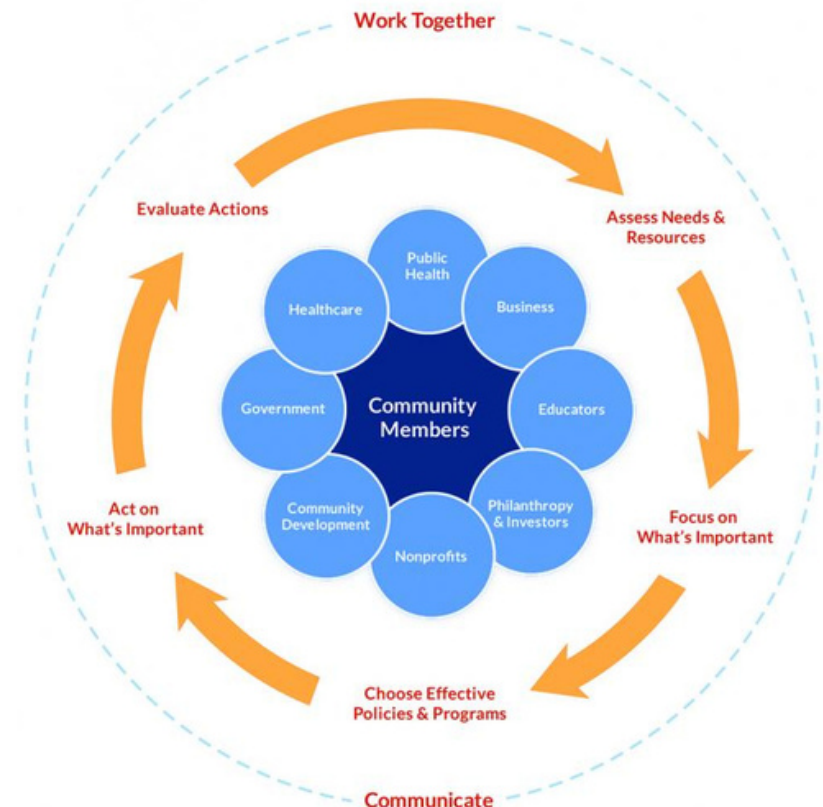
Improve community health through the power of partnerships, collaboration, and strategic alignment around Davis County's top health priorities.

Davis4Health Vision

Shared commitment toward a culture of health.

In February 2022, a Davis4Health progress celebration was held to acknowledge partners for their contributions and to recognize community health improvement successes. The Davis4Health Annual Progress Report (2020-2021) that describes the community's efforts to prevent and reduce suicide, Adverse Childhood Experiences (ACEs) and trauma, and opioid misuse is available online at go.usa.gov/xTJkZ. In addition to community successes, this document contains data, resources, and links to community prevention activities and behavioral health services.

The Davis4Health Steering Committee met in April and October 2022. Partners expressed support for having Davis4Health serve as the county equity improvement collaborative. They also would like the next Community Health Improvement Plan (CHIP), due for release in 2024, to serve as the county equity improvement plan. Davis4Health is working to improve health outcomes for all and to close the health gaps between those with the most and least opportunities for good health. Isa Perry is the point of contact. To learn more about Davis4Health visit about.davis4health.org.



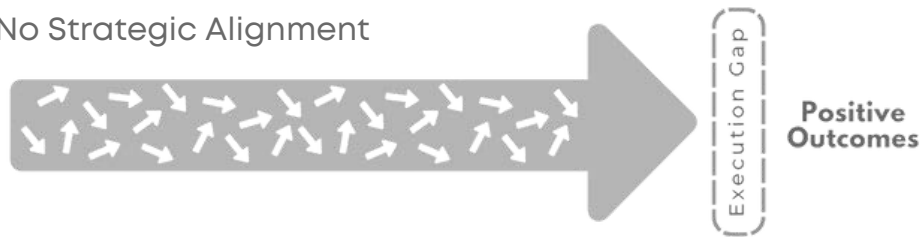
Engage Community Partners

Engage Community Partners Summary by the Numbers

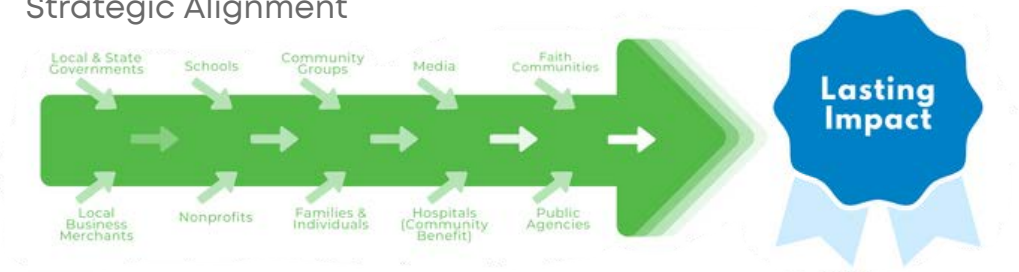
100+	Unique partners engaged
13	Coalitions and collaboratives supported
12	Community collaboratives led, coordinated, or administered
2	New collaboratives convened

Can Davis County Use the Power of Strategic Alignment?

No Strategic Alignment



Strategic Alignment



Adapted from Power of Strategic Alignment, by M. Mason, 2015

Davis Behavioral Health Network

The Davis Behavioral Health Network was formed in 2013 to bring service providers, community-based organizations and other interested partners together to work on improving access to behavioral health services in Davis County. DCHD and Davis Behavioral Health provide administrative support to the group which meets on a quarterly basis. Isa Perry is the point of contact.

Davis County Abuse Prevention Workgroup

The purpose of the Davis County Abuse Prevention Workgroup is to coordinate abuse prevention efforts, create a prevention strategic plan, align resources, and increase collaboration. Meetings take place monthly. Marcie Clark and Teresa Smith are the points of contact.

Davis County Intergenerational Poverty Committee

The Davis County Intergenerational Poverty Committee convened from July 2018 to September 2022, when it was combined with the Human Services Directors Committee efforts. The committee addressed intergenerational poverty through a multi-sector approach and a shared vision that focused on utilizing the county's strengths to build solutions across systems. Meetings took place quarterly. Marcie Clark was the point of contact.

Davis County Local Homeless Council

The purpose of the Davis County Local Homeless Council is to reduce the number of individuals and families experiencing homelessness, house those experiencing homelessness in long-term housing as rapidly as possible, and prevent homelessness. The council meets every other month. Marcie Clark is the point of contact.

Engage Community Partners

Coalitions and Collaboratives HSB Coordinates and Leads

Davis County Resilience Symposium Planning Committee

The Davis County Resilience Symposium Planning Committee is a subgroup of the Human Services Directors Committee. The committee plans and executes the annual Community Resilience Symposium. Meetings take place monthly. Marcie Clark is the point of contact.

Davis Food Environment Workgroup

The Food Environment Workgroup includes various community partners that meet to improve food access in Davis County. The group met every other month until the COVID-19 pandemic in March of 2020 and reconvened in January 2022, which now meets monthly. Travis Olsen is the point of contact.

Davis Helps

Davis Helps is the lead coalition in Davis County working on suicide prevention and coordinated prevention efforts in general. The coalition has been meeting since 2008, and began to focus on suicide during 2013. Meetings take place monthly. Teresa Smith is the point of contact.

Human Services Cabinet

The Human Services Cabinet is the oversight committee for human services and makes policy decisions, allocates resources, advises on funding, assists in the development of the county consolidated plan, and provides vision and strategic direction. Meetings take place every other month. Marcie Clark is the point of contact.

Human Services Directors Committee

The Human Services Directors Committee provides input on priority areas of health, safety, and stability. It is the primary workgroup that develops and implements Davis4Health ACEs and Trauma prevention strategies. Meetings take place every other month. Marcie Clark is the point of contact.

Marshallese Moms and Babies Workgroup

The Marshallese Moms and Babies Workgroup was created in the summer of 2022 to address maternal and child health disparities. The group consists of partners who serve Pacific Islander women and families throughout Davis County. Meetings are held as needed. Danty Marshall and Tima Clawson (UPIHC) are the points of contact.

Opioid Workgroup

The Davis County Opioid Prevention Workgroup was formed in 2019 to bring together the many partners touched by and responding to the opioid epidemic. The Davis County Health Department provides administrative support to the group. Meetings take place quarterly. Kaylee Crossley is the point of contact.



Davis County Human Services Organization & Priorities



PRIORITIES



ACEs, Trauma & Resilience (Davis4Health CHIP Priority)

Engage Community Partners

Coalitions and Collaboratives HSB Participates In

- Communities that Care (CTC) Coalitions
 - North Davis, Layton, and South Davis
- Coalition for Abuse Prevention of the Elderly (CAPE)
- Davis Active Transportation Committee
- Davis Council of Governments (COG)
- Davis County Domestic Violence Coalition
- Davis Criminal Justice Coordinating Council
- Davis Head Start Health Services Advisory Committee
- Davis Links Planning Committee
- Surveillance Epidemiology Evaluation and Data (SEED)
- Utah Community Health Advisory Board
- Utah Community Health Needs Assessment Collaborative



Connect the Dots through Davis Links Networking Event

Davis Links connects service providers to available community resources in Davis County. Online forums are held monthly and cover topics chosen by the planning committee. Each forum includes a main presenter who gives a brief overview of the topic followed by several community partners who provide resources.

In September 2022, HSB staff helped plan and implement an in-person networking event with 67 attendees. Service providers and community resource representatives were able to become acquainted or reacquainted with resources and each other in order to make better referrals and help individual community members. Follow-up emails and contact information were shared to all registrants for continued networking.

Engage Community Partners

Partner Event Highlights

Pacific Islander Fair

Pacific Islander Health Week was celebrated for the first time in Davis County this year by holding a Pacific Islander Health Resource Fair at the Eccles Wildlife Education Center. Staff helped to plan the event with other community champions and shared resources on the day of the event. Over 18 different organizations attended. Cultural performances were incorporated into the event and education about healthy eating, diabetes, and local health resources for individuals and families were shared with the community. Around 150-180 community members attended. People from out of the county also attended the event from as far as Logan and Rose Park.



Point in Time Count

The Point in Time (PIT) Count is an annual count of sheltered and unsheltered individuals experiencing homelessness. Volunteers work in teams to seek out and interview individuals in order to connect them with available resources. The PIT Count is federally mandated and is sponsored by the Local Homeless Council (LHC). Staff assisted in planning, promoting, and recruiting volunteers for the event. In the early morning hours on January 27 to 29, 2022, four staff members assisted in interviewing 27 people experiencing homelessness in Davis County.

Utahns Against Hunger Davis Food Access Stakeholder Event

In partnership with Utahns Against Hunger (UAH), DCHD hosted a Davis Food Access Stakeholder Meeting in August of 2022. The event was promoted across many coalitions and workgroups. Staff created and administered a poll to determine stakeholder perception of the food environment in Davis County, including those most at risk for food insecurity. The Davis Food Environment Workgroup presented results from the Summer Lunch Program Nutrition Survey which was conducted in 2022. UAH presented on the food landscape in Davis County, including federal nutrition assistance programs and potential legislation affecting the county. Stakeholders shared their feelings about barriers and opportunities within the food environment. Partners were also able to network. Sixteen external partners representing eleven agencies participated.

Youth Mental Health Screenings

In collaboration with community partners, two mental health screening events for youth were conducted in 2022. These events were designed to serve preschool to twelfth grade students who have behavioral health concerns. Parents and youth were able to check in with a mental health professional for free. Screenings and appointments were an opportunity to discuss social and emotional needs, anxiety, depression, trauma, suicide, and safety concerns. Follow-up appointments, connections to services, and links to community resources were provided as needed. These events served a total of 116 youth.



Engage Community Partners

Our Partners

Adelaide Elementary
Adult Protective Services
Alliance Community Services
American Association of Retired Persons
American Legion
Blue Star Families
Bountiful City
Bountiful Community Food Pantry
Bountiful Elementary
Canyon Heights High School
Centerville Cares
Children's Justice Center (CJC)
Children's Service Society (Grandfamilies)
Church of Jesus Christ of Latter-day Saints
Clearfield Community Church
Clearfield Police Department
Comunidad Materna
Congressman Stewart's Office
Continue Mission
Davis Behavioral Health (DBH)
Davis Chamber of Commerce
Davis Community Housing Authority
Davis Community Learning Center
Davis County Board of Health
Davis County Commission
Davis County Community & Economic Development
Davis County Pride
Davis County Sheriff's Office
Davis Education Foundation
Davis High School
Davis Hospital
Davis Journal
Davis School District (DSD)
Davis School District Board of Education

Davis Technical College
Davis Vocational Rehabilitation
Department of Child & Family Services (DCFS)
Department of Health & Human Services (DHHS)
Department of Workforce Services
Family Counseling Service of Northern Utah
Family Promise of Ogden
Francis Peak/Mercy Housing
Friends for Sight
Get Healthy Utah
Habitat for Humanity
Head Start
Health Choice Utah
Help Me Grow Utah
Hill Air Force Base
The Hope Center
Intermountain Healthcare
International Rescue Committee (IRC)
La Positiva Radio
Lakeview Hospital
Lantern House
Latino Behavioral Health Services (LBHS)
Layton City
Layton High School
Midtown Community Health Center
Molina Healthcare
My Discovery Destination
National Association for the Advancement of Colored People (NAACP)
National Family Support Network
Nations for Christ (N4C) Church
No Hunger Zone
North Salt Lake City Council
Northern Utah Academy of Math Engineering and Science (NUAMES)

Northern Utah Hope Task Force (NUHOPE)
Oaxaca en Utah
Ogden Clinic
Open Doors
Pantry Smiles
Phoenix Services
Pioneer Adult Rehab Center
Representative Blake Moore's Office
Roads to Independence
Safe Harbor
Saprea
Turning Point Centers
United Micronesians Women
United Way of Northern Utah
United Way of Salt Lake
University of Utah
Utah Association of Local Health Departments
Utah Community Health Worker Association
Utah Food Bank
Utah Marshallese Association
Utah Pacific Islander Health Coalition (UPIHC)
Utah Parent Center
Utah Pride Center
Utah State University
Utah State University Extension
Utah Transit Authority (UTA)
Utahns Against Hunger (UAH)
Veterans Affairs
Victim Services Coordinator, Kaysville
Wasatch Front Regional Council
Waterford Upstart
Weber State University
Woods Cross City Council

Advocate for Those Who Are Underserved

Advocate for Those Who are Underserved Summary by the Numbers

58	Individual connections to resources
33	Verbal interpretations
31	Outreach events attended
13	Document translations
3	Spoken languages other than English



Outreach

Staff participated in over 30 outreach events throughout the county. They provided education on topics such as COVID-19, diabetes prevention, healthy living, mental health, Mpox (monkeypox), routine immunizations, and poison prevention. Staff connected those in need to DCHD programs, such as Meals on Wheels, Senior Services, the Vehicle Repair and Replacement Assistance Program (VRRAP), and Women, Infants, and Children (WIC). Additional resources were shared, including COVID-19 self-test kits and Staycation Guides.

CHWs also helped individuals one-on-one with needs, connecting nearly 60 people to agencies providing food and rental assistance, half of which needed help as a result of being isolated due to COVID-19. CHWs partnered with DCHD nurses to help with language needs for home visits, tuberculosis (TB) treatment, and vaccinations for refugees and underserved families. CHWs also worked with partner agencies to help individuals enroll in Medicaid and other assistance programs offered locally and statewide.

Among the many resources shared by CHWs, the most popular resources were:

- Rental assistance
- Food assistance
- Housing resources
- Medical/treatment resources
- Utility/financial assistance

"People are getting vaccinated nowadays, especially for the Marshallese community. They would always say yes we'll go and get the vaccine but there's more to it. They needed help with translation and also heard a lot about misinformation or just concern about the vaccine.

But, when I educate them about how safe and effective the vaccine is they feel safe to take it, and they also recommend it to their families and friends. They also mention that they are very grateful to find out from someone that they know and trust but most importantly someone that knows and speaks their own language, and knows about their culture and their way of life."

Danty Marshall, Community Health Worker

Advocate for Those Who Are Underserved

Expanding Reach through Language

Radio Appearance

Two CHWs had the opportunity to speak on La Positiva Radio, an hour-long radio show that reaches the local Spanish-speaking community. They shared the roles that CHWs play in the community, the conditions of mental health in Davis County, and the importance of organizations like Davis Behavioral Health. They also shared information on Communities that Care, Davis4Health, Davis County's Spanish Mental Health Directory, the 988 Suicide & Crisis Lifeline, the CHW line, and the Parent Tips text line.



Social Media

Staff worked with different divisions to create culturally appropriate social media messages and posts. Much of the work was translating posts into Spanish to promote the WIC program and sharing information about COVID-19 and Mpox vaccine clinics.



Help/Ayuda/Ede/Jibañ

Receiving information in a primary language is an important component of health equity. While barriers continue to exist for some language needs, CHWs were able to fill gaps by providing language assistance, including interpreting and translating, for nearly 50 internal needs in 2022, helping every DCHD division better serve the public.

"I helped a family that adopted two Haitian little boys. The family was in need of some interpretation for the boys. I met up with the family at Tanner Clinic and I was able to talk to the boys in Haitian Creole and get to know them a bit. It was amazing to have the opportunity to talk to the boys and learn more about their backgrounds. I enjoyed the opportunity to connect with the family and now they know they have someone who speaks the same language as the boys and knows of resources that could benefit them in the community. I am grateful for the chance to help in a small way."

Daline Figaro, Community Health Worker

Advocate for Those Who Are Underserved

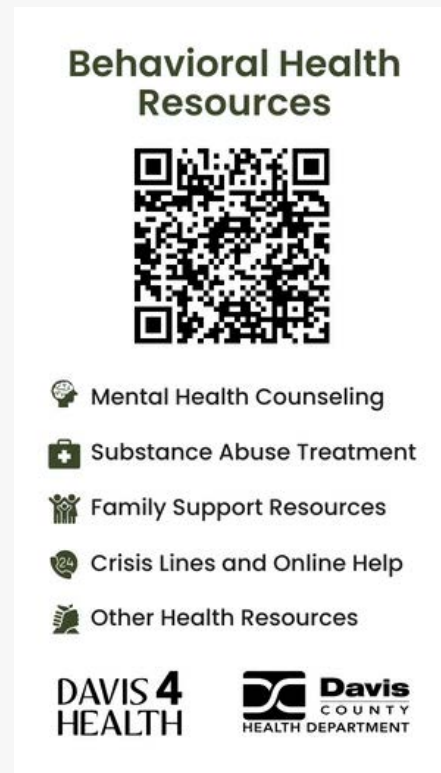
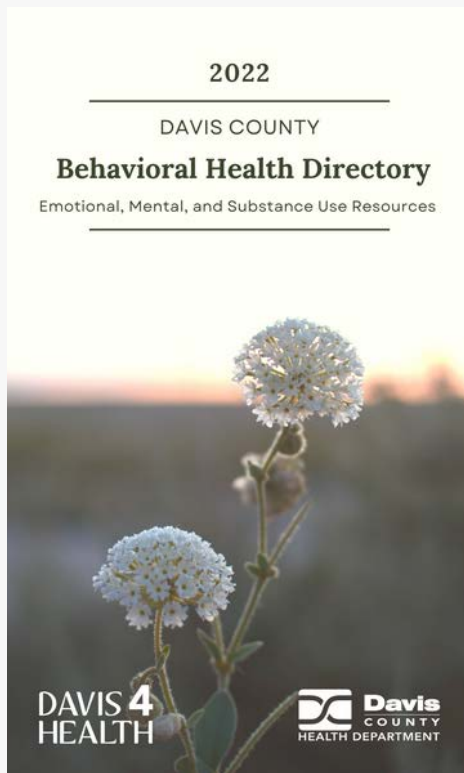
Resource Sharing

Several staff members worked together to update the Behavioral Health Directory and produce a Mental Health Services Directory for Spanish Speakers. The 2022 Davis County Behavioral Health Directory contains nearly 300 local services, such as:

- Crisis lines
- Medical treatment
- Substance abuse help
- Counseling
- Support groups
- Family support resources
- Victim services

Due to high need in the community for Spanish-speaking mental health providers in Davis County, a Spanish Mental Health Resource Directory was also created. It lists over 20 local mental health providers and organizations that provide services in Spanish without an interpreter.

Both directories are shared digitally on the DCHD website with hyperlinks for easy navigation and nearly 2,000 print copies have been shared throughout the Department, with partners, and at every outreach event. Resources are added to these directories as needed and updated versions are published and shared on an ongoing basis. Because of high demand, a pass along card was created with a QR code that directs users to the online versions of both directories as well as the 2021 Youth Services Directory.



From left to right:
Cover of the 2022 Davis County Behavioral Health Directory; Cover of the Spanish Mental Health Services Directory; QR code card that directs to directories.davis4health.org.

Plans for 2023

In 2023, the Health Strategy Bureau will:

- Host the first ever Davis4Health Equity Symposium
- Publish the third iteration of the Davis4Health Community Health Assessment (CHA)
- Work with community partners to select and update community health and equity improvement priorities
- Develop the third iteration of the Davis4Health Community Health Improvement Plan (CHIP)
- Release five topic and/or population specific equity assessments
 - Community Equity
 - Community Resilience
 - Food Environment
 - Housing Environment
 - LGBTQ+ Population
- Convene a suicide postvention workgroup to develop a countywide suicide postvention plan
- Add a new member to the team, Ana Campbell, Community Health Worker

New internal committee assignments in 2023:

- Lead the Community and Partner Engagement Team (CPET)
- Participate in the Workforce Development Committee

